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RECOMMENDATIONS FOR PREVENTING TRANSMISSION OF HUMAN IMMUNODEFICIENCY VIRUS AND HEPATITIS B VIRUS TO PATIENTS DURING EXPOSURE-PRONE INVASIVE PROCEDURES

The Virginia Board of Medicine, in concurrence with recommendations from the Centers for Disease Control, adopts the following position.

The recommendations outlined in this document are based on the following considerations:

- ° Infected health care workers who adhere to universal precautions and who do not perform invasive procedures pose no risk for transmitting HIV or HBV to patients.
- ° Infected health care workers who adhere to universal precautions and who perform certain exposure-prone procedures pose a small risk for transmitting HBV to patients.
 - ° HIV is transmitted much less readily than HBV.

To minimize the risk of HIV or HBV transmission, the following measures are recommended:

° All health care workers should adhere to universal precautions, including the appropriate use of handwashing, protective barriers, and care in the use and disposal of needles and other sharp instruments. Health care workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment and devices used in performing invasive procedures until the condition resolves. Health care workers should also comply with current guidelines for disinfection and sterilization of reusable devices used in invasive procedures.

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- ° Currently available data provide no basis for recommendations to restrict the practice of health care workers infected with HIV or HBV who perform invasive procedures not identified as exposure-prone, provided the infected health care workers practice recommended surgical or dental technique and comply with universal precautions and current recommendations for sterilization/disinfection.
- ° Exposure-prone procedures should be identified by medical/surgical/dental organizations and institutions at which the procedures are performed.
- On Health care workers who perform exposure-prone procedures should know their HIV antibody status. Health care workers who perform exposure-prone procedures and who do not have serologic evidence of immunity to HBV from vaccination or from previous infection should know their HBsAg status and, if that is positive, should also know their HBeAg status.
- Health care workers who are infected with HIV or HBV (and are HBeAg positive) should not perform exposure-prone procedures unless they have sought counsel from an expert review panel and been advised under what circumstances, if any, they may continue to perform these procedures. Such circumstances would include notifying prospective patients of the health care worker's seropositivity before they undergo exposure-prone invasive procedures.

The Virginia Board of Medicine recommends that health care workers who perform exposure-prone invasive procedures be annually tested for HIV and HBV. Further, HIV or HBV positive practitioners, who know or should know their HIV or HBV positivity, and who perform exposure-prone invasive procedures without informed consent of patients, shall be considered guilty of unprofessional conduct or other applicable section of the Code of Virginia for which the Board may apply appropriate sanctions.